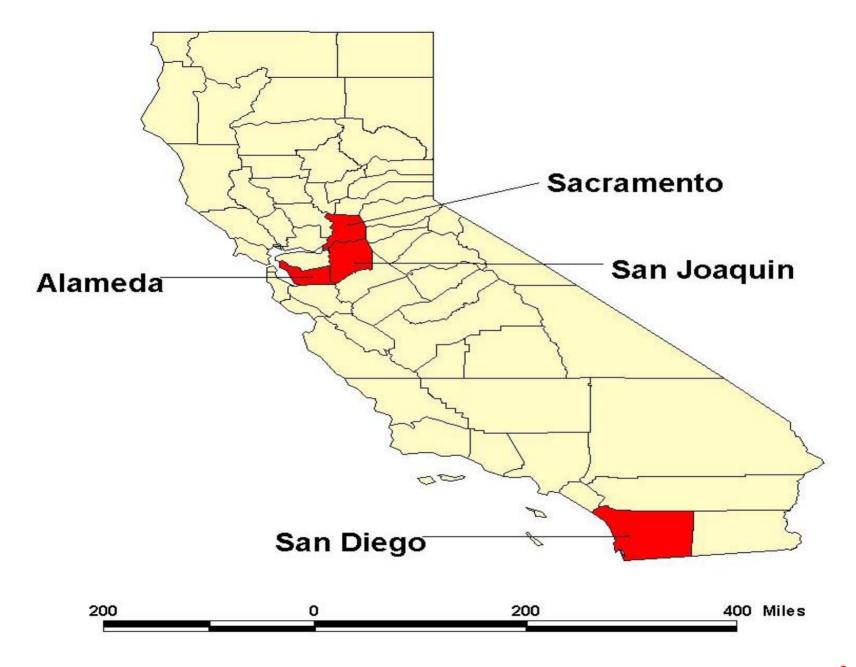
## **Increasing Universal** Offering of Voluntary Counseling and HIV Testing (VCT) and Test Acceptance **During Prenatal Care in** California



#### Needs Assessment

- Identified gaps in VCT services in four CA counties in 2000-01 through:
- Client surveys and interviews (n=1363),
- 2. Provider questionnaires (n=135),
- 3. Special population focus groups, and
- 4. A review of available relevant data.

## Summary Findings

- Although CA law mandates offering VCT to all women in prenatal care (PNC), only 47.4% of women reported receiving counseling and 74.3% of women reported being offered an HIV test.
- However, 85.1% of providers report offering counseling and 93.2% report offering HIV testing to >90% of their prenatal clientele.

#### Prenatal Care Access/Utilization

- The primary barrier to VCT is not receiving prenatal care.
- In CA, women most at risk of having no prenatal care are under 24, are Latina, and have less than a high school education.

## Sociodemographic Barriers to Counseling

- Most likely to be counseled:
- Black,
- Under 25,
- Lived in the U.S. ten years or more,
- Private insurance.

- Least likely to be counseled:
- Asian/PI,
- Over 25,
- Lived in the U.S. one year or less.

## Sociodemographic Barriers to HIV Test Offer

- Most likely to be offered a test:
- Black and White women,
- Private/HMO health coverage,
- Lived in the U.S. longer than 10 years.

- Least likely be offered a test:
- Asian/PI
- 35+ years old.

### Barriers to Test Acceptance

- 1. Test acceptance rates based on amount of time living in the U.S.:
  - Less than one year: 93.8%
  - More than ten years: 90.7%
  - Between six and ten years: 87.7%
  - Between one and five years: 83.6%

### Barriers to Test Acceptance

#### 2. Acceptance rates by race/ethnicity:

Mixed/Other: 95.4%

• Black: 92.2%

Hispanic: 89.5%

White: 88.0%

Asian/ PI: 84.9%

#### 3. Acceptance rates by insurance status:

Private insurance: 90.4%

Medi-Cal: 90.3%

All other: 85.5%

### Reasons Test Was Accepted

- For my health and the health of my baby (92.1%).
- Because my doctor or nurse told me I should (68.1%).

- Didn't feel like I had a choice (22.1%).
- Other: to be safe/sure, previous highrisk behavior, partners risk behavior.

#### Reasons Test Was Declined

- I already had a test (43.7%).
- I didn't think I could be HIV infected (33.3%).
- Not comfortable with how the doctor/ nurse asked me to take the test (16.1%)
- I didn't want to know the result because I am afraid (10.6%).
- Other: thought it was done normally, afraid of being charged extra.

# Women's Input: How Can Women Be Encouraged to Test?

- It is better if they just tell me to take the test.
- It is easiest to just get a form to sign saying either yes or no.
- It is best if they just do the blood work and then send me the results.

# Women's Input: What is the Best Way to Offer an HIV test?

- Give me all the explanations of things I could do or couldn't do.
- Make sure women understand that they can help their baby's health.
- Less formalized, clinical counseling.
- More support both before and after test.

#### Interventions to Increase VCT

ProviderTraining

SocialMarketing

CaseManagement

CommunityOutreach

## Provider Training

- Clarification of legal requirement to offer VCT to <u>every</u> patient.
- Update on treatment options.
- Information from the needs assessment.
- Effective counseling materials.

#### Consumer Education

 Community Outreach and Social Marketing: Increase knowledge about pregnancy and HIV among pregnant women, their partners, and the community as a whole.

## Case Management

- Can help a woman make informed decisions about testing and treatment acceptance.
- Can provide extra support both during and after testing process.
- Can help insure woman receives full spectrum of needed services.

## Brief Summary

## In order to increase VCT and test acceptance rates in CA:

- Providers must offer VCT to all clients either by providing VCT themselves or by referring clients to a counseling and/or testing specialist.
- Women and their partners need to learn about HIV and pregnancy and receive support around these issues.
- Providers and others
   offering VCT need access
   to quality materials to
   help with the counseling
   process and should
   understand the affect
   their attitudes may have
   on client testing choice.

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